

**FOR COUNTY USE ONLY**

E	New	Vendor Code			SC	Dept. OOA	A	Contract Number 00-773 A-1	
M	Change								
X	Cancel								
County Department Aging And Adult Services					Dept. OOA	Orgn. OOA	Contractor's License No.		
County Department Contract Representative Lori Ciabattini					Ph. Ext. 388-0253		Amount of Contract \$785,637.00		
Fund SYW	Dept. OOA	Organization OOA	Appr.	Obj/Rev Source 8840/9150	Activity	GRC/PROJ/JOB Number			
Commodity Code			Estimated Payment Total by Fiscal Year						
			FY	Amount	i/D	FY	Amount	i/D	
Project Name			00/01	\$669,340					
Community Based Programs			00/01	\$116,297	I				

County of San Bernardino
F A S

CONTRACT TRANSMITTAL

CONTRACTOR CALIFORNIA DEPARTMENT OF AGING

Birth Date _____ Federal ID No. or Social Security No. 95-6002748

Contractor's Representative Dixon Arnett, Director

Address 1600 "K" Street, Sacramento, Ca 95814 Phone (916) 322-3887

Nature of Contract: *(Briefly describe the general terms of the contract)*

Since Fiscal Year 1997-1998, the County has received funding from the California Department of Aging to provide community based service programs. Approval of this contract amendment will enable the County to receive an increase in State funding in the amount of \$116,297 to support community based service programs, such as the Health Insurance Counseling and Advocacy Programs (HICAP).

Amendment No. 1 to State Contract No. CB-0001-20 provides DAAS with an additional \$116,297 to offset administration and contracted services.

THIS IS NOT A CONTRACT
THIS IS A COVER
TRANSMITTAL ONLY

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)



Regina Coleman, County Counsel

Date _____



Tanya Bratton, Contract Compliance

Date _____



Agency Administrator/CAO

Date _____